

**2004 Charge Data and
Uncompensated Care**
(Excludes Kaiser, State, Shriner, PHF, and LTC Emphasis hospitals)

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Hospital Name	(All)
County	(All)
Type of Control	(All)
Type of Care	GENERAL ACUTE
Health System	(All)
Teaching or Rural	(All)

Data	Total
No. of Hospitals	345

Payer Categories	Amount Billed (Gross Charges)	Amount Collected*	% of Charges Collected
Medicare - Traditional	51,894,496,442	11,153,255,953	21.49%
Medicare - Managed Care	9,627,834,978	2,471,884,588	25.67%
Medi-Cal - Traditional	26,626,801,950	6,664,632,815	25.03%
Medi-Cal - Managed Care	7,645,127,429	1,713,154,921	22.41%
County Indigent Programs	4,284,587,942	566,408,773	13.22%
Other 3rd Parties - Traditional	10,395,892,186	4,630,603,461	44.54%
Other 3rd Parties - Man. Care	42,652,578,409	14,640,943,096	34.33%
Other Indigent	1,391,774,091	130,074,441	9.35%
Other Payers	4,813,460,075	1,555,050,318	32.31%
Total	159,332,553,502	43,526,008,366	27.32%

* Amount reflects Medi-Cal DSH and supplemental funds transferred back to related organizations.

Financial Ratios	Ratio
Cost-to-Charges	27.58%
Operating Margin	(0.93%)

Cost-to-Charges = (Total Operating Expenses - Other Operating Revenue) / Gross Patient Revenue

Operating Margin = Net Income from Operations / (Net Patient Revenue + Other Operating Revenue)

Uncompensated Care	Amount Provided (Charges)	% of Gross Charges	Cost (est.)
Charity	1,782,740,434	1.12%	491,684,100
County Indigent Cont. Adj.	3,683,233,241	2.31%	1,015,844,588
Bad Debts	3,086,919,080	1.94%	851,379,708
Total	8,552,892,755	5.37%	2,358,908,397

Uncompensated Care Costs = Amount Provided x Cost-to-Charge Ratio